



BLS: CPR and First Aid

SCENE SAFETY ASSESSMENT

S	Stop
A	Assess Scene
F	Find Oxygen Kit, First Aid Kit, AED and take to injured person
E	Exposure Protection

INITIAL ASSESSMENT

- Assess responsiveness and normal breathing
 - Tap the individual's collar bone and loudly ask, "Are you OK?"
 - State your name and desire to help
- If the individual responds, have him remain in the position found
- If unresponsive but breathing normally, place in recovery position
- If not breathing normally, begin CPR
 - Shout for help or send a specific person to call EMS

CPR

Do not delay CPR to wait for an AED or other equipment

- Use nipple line to find landmark at centre of the chest for compressions
- Deliver 30 compressions
 - Compress at a rate of 120 per minute
 - Compress to a depth of 5-6 cm
- Open airway using head tilt-chin lift
- Deliver two normal breaths
 - Each breath should last about 1 second
 - Watch for chest to rise and fall
- Continue CPR cycles of 30:2

USING AN AED

- Turn the unit on, and follow prompts provided by the unit
- Apply pads firmly to the patient's bare chest
 - Follow illustrations on pads for placement
- If the AED indicates 'shock advised'
 - Clear the scene both verbally and visually
 - State: "I'm clear, you're clear, all clear"
- Deliver shock when indicated
- Begin chest compression immediately. DO NOT pause after shock
- Follow prompts of the AED unit
- If signs of breathing return, place the patient in the recovery position
 - Continue to monitor the patient
 - Be prepared to resume CPR

HAND OVER TO EMS

- While waiting for EMS, continue to monitor the patient
- Leave the AED pads in place and unit turned on
- Provide a brief report to EMS indicating
 - Nature of incident and initial condition
 - Care given, including CPR and number of AED shocks
 - Length of time patient was not breathing and without circulation
 - Estimated time CPR was initiated

CPR & FA



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FOREIGN-BODY AIRWAY OBSTRUCTION

- Locate navel and place balled fist, thumb in, against stomach above navel
- Place other hand over fist
- Pull sharply inward and upward repeatedly until obstruction is released
- If patient becomes unconscious, begin CPR, starting with compressions

FIRST AID

- Bleeding
 - Apply direct pressure to the wound until the bleeding is controlled
 - o Apply dressing; use additional absorbent material if needed
 - Bandage the dressing in place, wrapping toward the heart
 - o Verify circulation in finger tips and toes
 - Do not remove impaled objects; secure them in place to avoid further injury
- Using a tourniquet
 - Apply 2-4 cm above the wound
 - Place windlass over bleeding artery
 - Turn windlass until bleeding stops and secure in place
 - Note "T" or "TK" on victim's forehead
 - Continue to monitor and provide verbal support
- Shock
 - Maintain normal body temperature (provide warmth/cooling as needed)
 - Do not provide food or drink
- Splinting
 - Apply splint to injured limb (splint limb in the position found)
 - Immobilise joints above and below the injury
 - Pad injured area to support and protect
 - Use sling with arm splints

SECONDARY ASSESSMENT

- Use eyes and hands to check for abnormalities, bleeding or other body fluids
- Inspect individual from head to foot, palpating gently and visually checking
 - Scalp, face, nose and ears
 - Neck and collarbones
 - Ribs and abdomen
 - Hips and legs
 - Arms and grip strength
 - Have patient wiggle fingers and toes
- Stop if the individual experiences pain
- Note abnormal findings